



Allegheny County Schools Health Insurance Consortium Retirees

Fashion Vision Plan

Healthy eyes and clear vision are an important part of your overall health and quality of life. Your vision plan helps you care for your eyes while saving you money by offering:

Paid-in-full eye examinations and eyeglasses!

Frame Collection: Your plan includes a selection of designer, name brand frames that are completely covered in full.¹

One-year eyeglass breakage warranty included on plan eyewear at no additional cost!

How to locate a Network Provider...

Just log on to the Open Enrollment section of our Member site at davisvision.com and click "Find a Provider" to locate a provider near you including:



For more details about the plan, just log on to the Open Enrollment section of our Member site at davisvision.com or call **1.877.923.2847** and enter Client Code **3137**.

IN-NETWORK BENEFITS		
Eye Examination	Every July 1, Covered in full	
Eyeglasses		
Spectacle Lenses	Every July 1, Covered in full For standard single-vision, lined bifocal, or trifocal lenses	
Frames	Every July 1, Covered in full Any Fashion frame from Davis Vision's Collection ¹ (value up to \$100) OR \$100 retail allowance toward any frame from provider OR \$150 allowance to go toward any frame from a Visionworks family of store locations. ⁵	
Contact Lenses		
Contact Lens Evaluation, Fitting & Follow Up Care	Every July 1, Non Collection Contacts: Standard Contacts: Covered in full Specialty Contacts ² : Covered in full	
Contact Lenses (in lieu of eyeglasses)	Every July 1 \$80 retail allowance toward provider supplied disposable contact lenses, \$110 retail allowance for specialty and non-disposable contact lenses	
ADDITIONAL DISCOUNTED LENS OPTIONS & COATINGS		
MOST POPULAR OPTIONS <small>Savings based on in-network usage and average retail values.</small>	Without Davis Vision	With Davis Vision
Scratch-Resistant Coating	\$25	\$0
Polycarbonate Lenses	\$66	\$0 ³ -\$35
Standard Anti-Reflective (AR) Coating	\$83	\$40
Standard Progressives (no-line bifocal)	\$198	\$0
Photochromic Lenses (i.e. Transitions [®] , etc.) ⁴	\$110	\$70

Lower costs and more benefits! See the savings!

Service	Without Davis Vision	With Davis Vision
Eye Examination	\$103	\$0
Lenses		
Bifocals	\$116	\$0
Scratch-Resistant Coating	\$25	\$0
Transitions ^{®/4}	\$110	\$70
Frame	\$160	\$0
Total	\$514	\$70

Savings up to:
\$444

PLEASE NOTE: YOU WILL BE PERMITTED ONE REINSTATEMENT FOR THE LIFE OF THE PLAN. PLEASE REFER TO YOUR BENEFITS CONTACT WITH ANY QUESTIONS.

¹ The Davis Vision Collection is available at most participating independent provider locations. Collection is subject to change.
² Including, but not limited to toric, multifocal and gas permeable contact lenses.
³ For dependent children, monocular patients and patients with prescriptions of 6.00 diopters or greater.
⁴ Transitions[®] is a registered trademark of Transitions Optical Inc.
⁵ Enhanced frame allowance available at all Visionworks Locations nationwide.
 Davis Vision has made every effort to correctly summarize your vision plan features. In the event of a conflict between this information and your organization's contract with Davis Vision, the terms of the contract or insurance policy will prevail.
 OE00586 6/28/18

Here's what we have to offer...

Value for our Members

A comprehensive benefit ensuring low out-of-pocket cost to members and their families. Our goal is 100% member satisfaction.

Convenient Network Locations

A national network of credentialed preferred providers throughout the 50 states.

Freedom of Choice

Access to care through either our network of independent, private practice doctors (optometrists and ophthalmologists) or select retail partners.

Value-Added Features:

- Mail Order Contact Lenses Replacement contacts (after initial benefit) through DavisVisionContacts.com mail-order service ensures easy, convenient, purchasing online and quick, direct shipping to your door. Log on to our member Web site for details.
- Davis Vision provides you and your eligible dependents with the opportunity to receive discounted laser vision correction, often referred to as LASIK. For more information, visit www.davisvision.com.

Contact Info

For more details about the plan, just log on to the Open Enrollment section of our Member site at davisvision.com or call **1.877.923.2847** and enter Client Code **3137**.

ADDITIONAL LENS OPTIONS	WITHOUT DAVIS VISION	WITH DAVIS VISION
All Ranges of Prescriptions and Sizes	\$90	\$0
Plastic Lenses	\$33	\$0
Oversized Lenses	\$20	\$0
Tinting of Plastic Lenses	\$20	\$15
Scratch-Resistant Coating	\$40	\$0
Polycarbonate Lenses	\$64	\$0 ¹ or \$35
Ultraviolet Coating	\$28	\$15
Standard Anti-Reflective (AR) Coating	\$62	\$40
Premium AR Coating	\$80	\$55
Ultra AR Coating	\$113	\$69
Intermediate-Vision Lenses	\$150	\$30
Standard Progressive Addition Lenses	\$154	\$0
Premium Progressives Addition Lenses	\$247	\$40
Ultra Progressive Addition Lenses	\$369	\$90
High-Index Lenses	\$120	\$60
Polarized Lenses	\$103	\$75
Plastic Photosensitive Lenses	\$123	\$70
Scratch Protection Plan (Single vision Multifocal lenses)		\$20 \$40

¹ Polycarbonate lenses are covered in full for dependent children, monocular patients and patients with prescriptions 6.00 diopters or greater.

² Varilux® is a registered trademark of Societe Essilor International

Out-of-Network Benefits

You may receive services from an out-of-network provider, although you will receive the greatest value and maximize your benefit dollars if you select a provider who participates in the network. If you choose an out-of-network provider, you must pay the provider directly for all charges and then submit a claim for reimbursement to:

Vision Care Processing Unit
P.O. Box 1525
Latham, NY 12110

OUT-OF-NETWORK REIMBURSEMENT SCHEDULE
<p>Eye Examination up to \$40 Frame up to \$64 Spectacle Lenses (per pair) up to: Single Vision \$30, Bifocal \$40, Trifocal \$60, Lenticular \$80 Progressive Lenses \$130</p> <p>Dependents up to age 19 may receive: Single Vision Polycarbonate \$70 Bifocal Polycarbonate \$80 Trifocal Polycarbonate \$95</p> <p>Evaluation/Fitting \$35 Elective Contacts up to \$80, Medically Necessary Contacts up to \$225</p>